KARMENTA CENTER 4502 MILWAUKEE ST

MADISON 53714 Phone: (608) 249-2137 Ownership: Nonprofit Limited Liability Company Skilled Operated from 1/1 To 12/31 Days of Operation: 366 Highest Level License: Operate in Conjunction with Hospital? Operate in Conjunction with CBRF? No Number of Beds Set Up and Staffed (12/31/04): 103 Title 18 (Medicare) Certified? Yes Total Licensed Bed Capacity (12/31/04): 105 Title 19 (Medicaid) Certified? Yes Number of Residents on 12/31/04: 102 Average Daily Census: 98

Services Provided to Non-Residents		Age, Gender, and Primary Di	Length of Stay (12/31/04) %				
Home Health Care	No	Primary Diagnosis % Age Groups %				Less Than 1 Year	50.0
Supp. Home Care-Personal Care Supp. Home Care-Household Services	No No	Developmental Disabilities	2.9	 Under 65	3.9	1 - 4 Years More Than 4 Years	35.3 14.7
Day Services	No	Mental Illness (Org./Psy)	27.5	65 - 74	7.8	More Illali 4 fears	14.7
Respite Care	No	Mental Illness (Ofg./Psy)	2.0	75 - 84	41.2	 	100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	40.2	 ********************	
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	6.9	Full-Time Equivalent	
Congregate Meals	No	Cancer	2.9	ĺ		Nursing Staff per 100 Res	idents
Home Delivered Meals	No	Fractures	9.8	İ	100.0	(12/31/04)	
Other Meals	No	Cardiovascular	4.9	65 & Over	96.1		
Transportation	No	Cerebrovascular	9.8			RNs	10.3
Referral Service	No	Diabetes	4.9	Gender %		LPNs	14.7
Other Services	No	Respiratory	9.8			Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	25.5	Male	27.5	Aides, & Orderlies	36.2
Mentally Ill	No			Female	72.5		
Provide Day Programming for			100.0				
Developmentally Disabled	Yes				100.0		
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Method of Reimbursement

		edicare			edicaid itle 19			Other		:	Private Pay	:		amily Care]	Managed Care	l		
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	4	7.1	150	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	4	3.9
Skilled Care	26	100.0	370	50	89.3	128	3	100.0	128	13	100.0	174	0	0.0	0	4	100.0	293	96	94.1
Intermediate				1	1.8	106	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				1	1.8	169	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	26	100.0		56	100.0		3	100.0		13	100.0		0	0.0		4	100.0		102	100.0

KARMENTA CENTER

Admissions, Discharges, and		Percent Distribution	of Residents'	Condit	ions, Services, and	d Activities as of 12/	31/04
Deaths During Reporting Period							
					% Needing		Total
Percent Admissions from:		Activities of	ક	As	sistance of	% Totally	Number of
Private Home/No Home Health	1.1	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.7	Bathing	23.5		19.6	56.9	102
Other Nursing Homes	2.2	Dressing	23.5		19.6	56.9	102
Acute Care Hospitals	94.9	Transferring	23.5		19.6	56.9	102
Psych. HospMR/DD Facilities	0.0	Toilet Use	23.5		19.6	56.9	102
Rehabilitation Hospitals	0.0	Eating	76.5		14.7	8.8	102
Other Locations	1.1	*******	******	*****	* * * * * * * * * * * * * * * * * *	******	*****
Total Number of Admissions	276	Continence		용	Special Treatmen	ts	용
Percent Discharges To:		Indwelling Or Extern	al Catheter	4.9	Receiving Resp	iratory Care	13.7
Private Home/No Home Health	34.4	Occ/Freq. Incontiner	ıt of Bladder	60.8	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	25.2	Occ/Freq. Incontiner	it of Bowel	40.2	Receiving Suct	ioning	0.0
Other Nursing Homes	3.3				Receiving Osto	my Care	1.0
Acute Care Hospitals	17.4	Mobility			Receiving Tube	Feeding	0.0
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed.	0.0	Receiving Mech	anically Altered Diets	34.3
Rehabilitation Hospitals	0.0					-	
Other Locations	9.3	Skin Care			Other Resident C	haracteristics	
Deaths	10.4	With Pressure Sores		5.9	Have Advance D	irectives	79.4
Total Number of Discharges		With Rashes		1.0	Medications		
(Including Deaths)	270				Receiving Psyc	hoactive Drugs	77.5

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

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		Own	ership:	Bed	Size:	Lic	ensure:		
	This	This Nonprofit			-199	Ski	lled	All	
	Facility	Facility Peer Group		Peer	Group	Peer	Group	Facilities	
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	93.3	92.7	1.01	90.2	1.03	90.5	1.03	88.8	1.05
Current Residents from In-County	95.1	84.6	1.12	82.9	1.15	82.4	1.15	77.4	1.23
Admissions from In-County, Still Residing	17.8	20.5	0.87	19.7	0.90	20.0	0.89	19.4	0.91
Admissions/Average Daily Census	281.6	153.0	1.84	169.5	1.66	156.2	1.80	146.5	1.92
Discharges/Average Daily Census	275.5	153.6	1.79	170.5	1.62	158.4	1.74	148.0	1.86
Discharges To Private Residence/Average Daily Census	164.3	74.7	2.20	77.4	2.12	72.4	2.27	66.9	2.45
Residents Receiving Skilled Care	98.0	96.9	1.01	95.4	1.03	94.7	1.04	89.9	1.09
Residents Aged 65 and Older	96.1	96.0	1.00	91.4	1.05	91.8	1.05	87.9	1.09
Title 19 (Medicaid) Funded Residents	54.9	54.6	1.01	62.5	0.88	62.7	0.88	66.1	0.83
Private Pay Funded Residents	12.7	32.6	0.39	21.7	0.59	23.3	0.55	20.6	0.62
Developmentally Disabled Residents	2.9	0.5	6.04	0.9	3.12	1.1	2.62	6.0	0.49
Mentally Ill Residents	29.4	37.4	0.79	36.8	0.80	37.3	0.79	33.6	0.88
General Medical Service Residents	25.5	20.2	1.26	19.6	1.30	20.4	1.25	21.1	1.21
Impaired ADL (Mean)	56.7	50.1	1.13	48.8	1.16	48.8	1.16	49.4	1.15
Psychological Problems	77.5	58.4	1.33	57.5	1.35	59.4	1.30	57.7	1.34
Nursing Care Required (Mean)	7.0	7.0	1.00	6.7	1.04	6.9	1.01	7.4	0.94